

**VDH COVID-19 Interim Guidance for Child Care Facility Collaboration
with the Local Health Department
as of July 22, 2020**

Summary of major changes from the previous version (May 4, 2020)

- Removed specific guidance on child care operations; refer instead to the [Virginia Department of Social Services guidance](#).
- Updated information on how child care facilities will work with local health departments if cases of COVID-19 are associated with the facility. Reorganized the information to cover illness detection, isolation, testing, contact tracing, and closure.
- Updated the definition of close contact to include exposure to respiratory secretions.
- Updated the criteria for releasing a person with COVID-19 from isolation. A person previously had to have no fever for three days, now they must have no fever for one day (24 hours.)

Summary of major changes from the previous version (March 29, 2020)

- Updated guidance for when to allow children or staff to return to the facility if they have been ill with COVID-19. The minimum amount of time has increased from 7 to 10 days.
- Updated symptoms to consider when screening staff and children.

The Virginia Department of Social Services (DSS) has guidance ([COVID-19 Reopening Child Care: Phase III Guidelines and Information for Child Care](#)) that outlines the procedures child care facilities need to have in place to safely reopen and operate during [Phase III of the Forward Virginia plan](#). The guidelines include recommendations for training and educating staff on policies and procedures, communicating with local health and social service authorities, maintaining distance between all children and staff in the facility, practicing proper infection control and sanitation, conducting temperature and symptom checks daily for staff and children, using cloth face coverings, especially when physical distance cannot be maintained, washing hands frequently, and limiting group size. The guidelines also refer child care providers to their [local health departments](#) (LHD) for assistance when a case of COVID-19 is confirmed in association with the facility.

Rather than repeating the DSS guidance, this document addresses when a child care facility director should contact the LHD and what steps may be taken following that contact.

Illness Detection

Child care facility staff play a key role in detecting illness among children and staff. All staff should be familiar with the signs and [symptoms of COVID-19](#) and be on the lookout for individuals who are exhibiting them. No one who has a temperature of 100.4°F or higher or any signs of illness such as rapid breathing, difficulty breathing, new cough or sore throat, chills, unusual tiredness or who has a household member or other close contact with those signs of illness should enter the facility. [Close contact](#) is defined as being within 6 feet of a person with COVID-19 for at least 15 minutes or having exposure to the person's respiratory secretions (for example, being coughed or sneezed on; sharing a drinking glass or utensils; kissing) while they were contagious. A person with COVID-19 is considered to be contagious starting from 2 days before they became sick (or 2 days before they tested positive if they never had symptoms) until they [meet the criteria to discontinue isolation](#).

A key strategy for early detection of illness is screening. Screen each person arriving at the facility by asking:

- If the person has any [signs and symptoms of COVID-19 infection](#)
- If the person has had [close contact](#) with someone suspected or confirmed to have COVID-19 (in the household or otherwise)

Deny entrance to any individual who is ill, has recently tested positive for COVID-19, or has had close contact with someone suspected or confirmed to have COVID-19, including someone in the household.

Staff should report any health concern in the facility to the facility director immediately. Develop a communication protocol for this process and ensure staff know and consistently follow this protocol. The facility director should then communicate with the LHD and other relevant licensing officials to ensure proper notification and discussion of procedures to follow to prevent disease.

To identify the correct LHD, the facility should use the [“VDH Health Department Locator”](#) and input the facility address. The LHD should be notified if any of the following is met:

- If individuals with known or suspected COVID-19 are identified among children, staff, or their household contacts
- If severe respiratory infection is identified among children, staff, or their household contacts
- If clusters (≥ 2) of staff and/or children are identified with any respiratory infection

The LHD will gather information, such as the number of staff and children in the facility, the number of ill individuals, symptoms and dates of illness, locations of illness within the facility (which rooms or offices), and number and identity of those who had close contact with an ill person. The LHD will also review the measures in place at the facility to limit the spread of disease.

Parents and guardians must be notified if an individual with COVID-19 is identified in the facility.

Isolation of Those with Symptoms

Identify a place in the facility where ill persons can stay until they are picked up and taken home. Staff should monitor all children (and other staff) for indications of fever or respiratory illness. Staff should immediately remove any ill individual from the group and take them to the designated area. Call parents and/or guardians and ensure the ill person is taken home as soon as possible.

Any ill person must stay home for a minimum of 10 days and until the [following criteria are met](#):

- They have had no fever for at least 1 day (that is 24 hours of no fever without the use of medicine that reduces fevers), AND
- Other symptoms have improved (for example, when cough or shortness of breath have improved), AND
- At least 10 days have passed since symptoms first appeared

Children and staff who test positive for the virus that causes COVID-19 but do not develop symptoms, must also stay home until at least 10 days have passed since the first positive test. If symptoms develop, then they must follow the criteria above.

The ill person or their parent/guardian should call their doctor if they have any concerns about the severity of symptoms. If COVID-19 is suspected or confirmed, all others in the household must stay home in quarantine for 14 days after their last exposure to the infectious person.

Testing

Facility directors are encouraged to contact the [LHD](#) any time they have concerns about illness in the facility. Depending on the circumstances, the LHD might recommend laboratory testing of ill persons to confirm the cause of illness.

Testing may occur in two different ways:

- Ill persons will be encouraged to contact their own healthcare provider to arrange for testing. A list of testing sites in Virginia may be found [here](#).
- The LHD will arrange for [public health testing](#) in an outbreak situation or for persons who are uninsured or under-insured.

Contact Tracing

The child care facility should maintain a daily log of staff and children that includes the following information:

- Identification and contact information
- Symptom status each day
- Group assignments
- Location within the facility (which room, office, etc.)

If a case of COVID-19 is confirmed, the LHD should be notified immediately. The person contacting the LHD should be prepared to provide a list of everyone the ill individual was in close contact with during the time interval beginning 2 days before their symptoms started (or date of positive test) until their exclusion from the facility. Close contact is defined as being within 6 feet of a person with COVID-19 for at least 15 minutes or having exposure to the person's respiratory secretions (for example, being coughed or sneezed on; sharing a drinking glass or utensils; kissing) while they were contagious. A person with COVID-19 is considered to be contagious starting from 2 days before they became sick (or 2 days before they tested positive if they never had symptoms) until they [meet the criteria to discontinue isolation](#).

The LHD will initiate contact tracing, and will maintain the confidentiality of the ill individual during this process. Contact tracing involves interviewing each close contact and discussing disease control measures with them, including self-quarantine. Close contacts should be quarantined at home for 14 days after their last exposure to the ill individual, and should **not** be allowed into the child care facility (or any other child care facility) during this time.

Closure

If a known or suspected case of COVID-19 infection occurs in one defined group within the facility, the ill person needs to go home as soon as possible (see "Isolation of Those with Symptoms" section above.) Other staff and children who had close contact with the ill person should be quarantined in their homes for 14 days after their last exposure to that person. Parents and/or guardians and all staff should be

informed of the situation, while maintaining the confidentiality of the ill person. The [CDC guidance for cleaning and disinfection](#) should be followed.

The impact on facility operations will be assessed in consultation with the local health department. If ill persons and close contacts can be excluded without affecting a larger population, then other groups within the child care facility who did not have close contact with the ill person may continue to function with daily screening for illness, physical distancing as appropriate, and strict adherence to personal and environmental hygiene measures.

If known or suspected cases of COVID-19 infection occur in multiple groups within the facility, the LHD will gather more information about the distribution and timing of illnesses, the layout of the facility, the locations where infected people spent time, and other factors, such as the size of the facility and the availability of staff. After considering these factors as well as the level of disease transmission in the community, the LHD will make a recommendation to the facility director on whether child care operations within the facility need to be suspended. If the facility director determines that the child care operations should be suspended, the recommended time frame for suspension is 14 days. While the facility is closed, the children and staff should **not** be sent to another child care facility. After 14 days have passed, the facility may reopen for children and staff who meet the following two criteria:

- The child/staff member is healthy and has no signs or symptoms of COVID-19
- There is no one in the child/staff member's household or other close contacts who is known or suspected to have COVID-19

If a household member is known or suspected to have COVID-19, then the child or staff member needs to be excluded from the child care facility until the [VDH criteria for ending quarantine](#) are met.

Additional Resources

Centers for Disease Control and Prevention:

[Childcare, Schools, and Youth Programs](#)

[Symptoms of Coronavirus](#)

[Discontinuation of Isolation for Persons with COVID -19 Not in Healthcare Settings](#)

[Cleaning and Disinfecting Your Facility](#)

Virginia Department of Health:

[Health Department Locator](#)

[COVID-19 Testing Sites in Virginia](#)

[VDH Updated Guidance on Testing for COVID-19](#)

Virginia Department of Social Services:

[COVID-19 Reopening Child Care: Phase III Guidelines and Information for Child Care](#)